

362  
J62j

THE  
JOHNS HOPKINS  
HOSPITAL



UNIVERSITY OF ILLINOIS  
LIBRARY



10  
60 J

Return this book on or before the  
*Latest Date* stamped below. A  
charge is made on all overdue  
books.

U. of I. Library

JUN 17 '38

JAN 25 1945

JAN -2 1946

11148-S

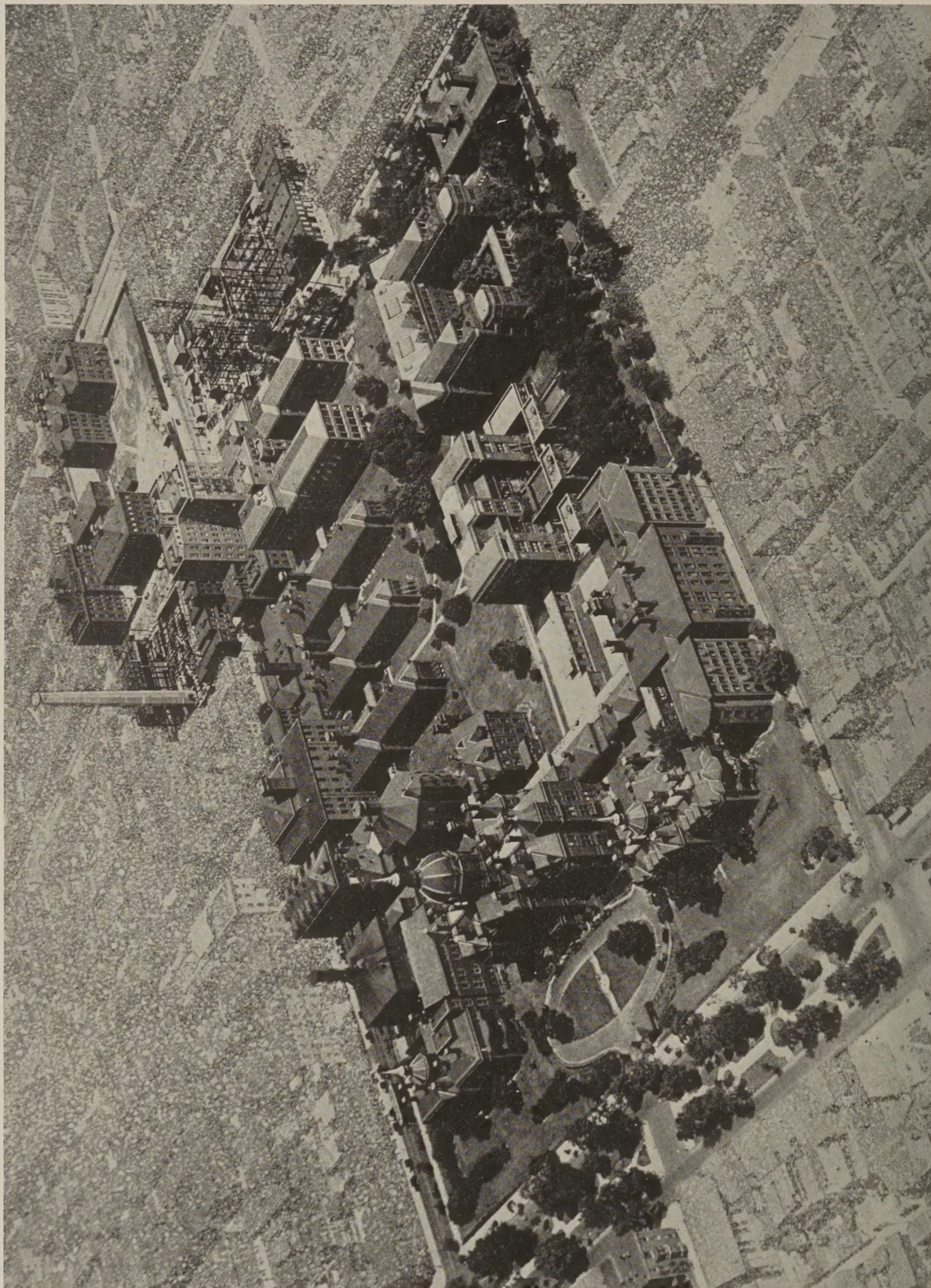
UNIVERSITY OF ILLINOIS  
JAN 10 1939  
THE LIBRARY OF THE

UNIVERSITY OF ILLINOIS  
LIBRARY - CHICAGO

UNIVERSITY OF ILLINOIS  
LIBRARY - CHICAGO



LIBRARY  
OF THE  
UNIVERSITY OF ILLINOIS



THE JOHNS HOPKINS MEDICAL GROUP

*Photograph by Tipton*

THE  
JOHNS HOPKINS  
HOSPITAL

7

PUBLISHED BY  
THE JOHNS HOPKINS  
HALF-CENTURY COMMITTEE  
BALTIMORE

1925



9 362  
J62j

## FOREWORD

1



3 Dec 31 1873

ON the tenth day of March, 1873, there was addressed to twelve of the leading men of Baltimore a remarkable document. It is not too much to say that this communication, in its far-reaching effects on social and educational progress, was one of world-wide importance.

This document was the letter of Johns Hopkins, setting forth to his trustees his hopes and plans for the future of the hospital which now bears his name.

The new hospital, he wrote, should "compare favorably with any other institutions of like character in this country or Europe;" it should admit "the indigent poor . . without regard to sex, age or color . . and . . without charge;" it should be staffed by "surgeons and physicians of the highest character and greatest skill;" it should "establish a training school for nurses . . to benefit the whole community;" and it should "ulti-

## FOREWORD

---

mately form a part of the Medical School of that University for which I have made ample provision in my will.”

These conditions, together with the unusual provisions for grounds, buildings and endowment, marked Johns Hopkins as a man of rare foresight. Time, and the faithful carrying out of his trust, have made his name known in the most distant parts of the world, and have established the Johns Hopkins Hospital as the central unit of what many believe to be one of the leading medical centers of the world.

The purpose of the following presentation is to explain in a brief but comprehensive manner the significance of the Johns Hopkins Hospital as an agency for the treatment and care of persons afflicted by acute diseases, for the pursuit of medical research, and for advancing the standards of medical education and the technique of modern medical practice.

HENRY D. HARLAN

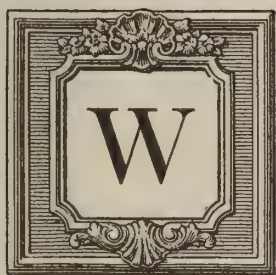
*Chairman of the Board of Trustees*

WINFORD H. SMITH, M.D.

*Director of the Hospital*

## THE JOHNS HOPKINS HOSPITAL WHAT IT IS

### I. *THE TREND TOWARD UNITY*



WITH hospitals, as with newspapers, banks, railroads and great manufactories, the trend today is toward concentration, toward the establishment of more complete and effective units. And especially is this true of organizations whose activities are nation wide. With hospitals this trend is toward the establishment of great medical centers, where there can be brought to bear upon the treatment of disease, and for the purpose of educating physicians, all the knowledge and facilities available to modern medical science.

Such centers have existed for many years in Europe, in Berlin, Vienna, Paris, London and a number of other cities. Such centers are either planned or in development in Boston, New York, Chicago, Philadelphia, Nashville and Rochester.

#### AN ESTABLISHED EXAMPLE

Baltimore, in possessing the Johns Hopkins Hospital and the medical branches of the Johns Hopkins University, has had such a center for many years, and, with the establishment since 1912 of the Johns Hopkins School of Hygiene and Public

Health and of four new clinical institutes and the financing of a fifth, many believe that the Johns Hopkins medical center is today the most thorough and effective mobilization, in one compact group, of medical resources in the New World.

#### NATIONAL IN SCOPE

This movement for the organization of great medical centers has arisen in many instances because in certain municipalities there has been an ever increasing realization that the medical facilities which serve the immediate community should be bet-

ter organized. The Johns Hopkins Hospital and the medical institutions with which it is affiliated, however, constitute more than a local medical center, for approximately 80 per cent. of its private patients and 33 per cent. of all its patients come from homes outside of Baltimore.

The Johns Hopkins Hospital has been and is a national and even an international hospital and from two viewpoints is one of the leading hospitals of the world. First, as a center for the treatment of all manner of acute diseases for rich and poor alike; and second, as a center for the training of physicians and surgeons.

The combination of these two aims has

proved both logical and effective. Through its methods in treating disease and in teaching students the Hospital has promoted a large amount of research work which has advanced medical knowledge and furthered the conquest of disease.

#### AN IMMEDIATE OPPORTUNITY

The Johns Hopkins Hospital is today one of the great hospitals of all time. In addition it presents an outstanding opportunity for the promotion of medical progress in the future and for the establishment of an even greater institution, such as may well equal any like venture, past or present, for the welfare of humanity.

## II. *THE INSTITUTION*

Johns Hopkins' original gift to the Hospital was \$3,228,404.84. Because he directed that it should be the equal of any like institution in the world, such an endowment was sufficient only to provide income for its operating expenses even at the beginning. For that reason it was necessary to allow the interest to accumulate for many years in order that the buildings might be erected without impairing the principal of the endowment.

Thus, it was not until 1889 that the Hospital was completed and opened.

#### GROWTH IN CAPACITY

The Johns Hopkins Hospital of 1889 was equipped with 230 beds. Its founder expressed the hope that it "might ultimately be able to receive four hundred patients." Today the total number of beds is 683, of which 473 are in the wards and 190 in the Marburg Building and other divisions

for private patients. With the completion of the Wilmer Institute, funds for which have already been provided, the total bed capacity of the Johns Hopkins Hospital will be 743.

#### THE GENERAL HOSPITAL

The aerial view, used as a frontispiece, indicates the physical proportions of the Hospital. Its grounds include fourteen and one-half acres—more than four city blocks. Its buildings, exclusive of the Medical School and the School of Hygiene and Public Health, with which it is associated, include twenty-one structures.

These buildings not only house the various and complex medical and surgical services of a great general hospital, as illustrated on the accompanying page, but also four great clinical institutes, each of which is a special hospital and research center in itself, yet all are integrated in the general hospital organization.

## GENERAL HOSPITAL

	Total No. of Beds
MEDICAL CLINIC, 92 Ward Beds . . . . .	92
GENERAL MEDICAL      METABOLIC DISEASES      NERVOUS DISEASES	
TUBERCULOSIS      GASTRO-INTESTINAL DISEASES      DISEASES OF THE HEART	
SURGICAL CLINIC, 93 Ward Beds . . . . .	93
GENERAL SURGERY      EAR, NOSE AND THROAT      DISEASES OF THE EYE	
BRAIN SURGERY      PLASTIC SURGERY      ORTHOPEDIC SURGERY      DENTAL CLINIC	
MARBURG BUILDING, 96 Private Rooms . . . . .	96
PAVILION FOR PRIVATE PATIENTS IN ALL GENERAL SERVICES	

## CLINICAL INSTITUTES

BRADY UROLOGICAL INSTITUTE, 21 Ward Beds, 20 Private Rooms, 19 Cubicles . . . . .	60
GENITO-URINARY DISEASES OF MEN	
WOMAN'S CLINIC, 126 Ward Beds, 10 Private Rooms, 18 Cubicles . . . . .	154
OBSTETRICS      GENITO-URINARY DISEASES OF WOMEN      GYNECOLOGY	
CHILDREN'S CLINIC (Harriet Lane) 90 Ward Beds, 10 Private Rooms . . . . .	100
MEDICAL DISEASES OF CHILDREN	
PHIPPS PSYCHIATRIC CLINIC, 70 Ward Beds, 18 Private Rooms . . . . .	88
MENTAL DISEASES	
<i>Present Total of Beds . . . . .</i>	<i>683</i>
WILMER INSTITUTE, 40 Ward Beds, 10 Private Rooms, 10 Cubicles . . . . .	60
<i>(Will be opened within the coming year)</i>	
DISEASES OF THE EYE	
<i>Total Number of Beds Next Year . . . . .</i>	<i>743</i>

## HOSPITAL LABORATORIES

PATHOLOGICAL	CHEMICAL	BACTERIOLOGICAL
SEROLOGICAL	PHYSIOLOGICAL AND CARDIOGRAPHIC	
<i>(For preparation of serums)</i>	<i>(For diagnosis of the physical action of the heart and other bodily organs)</i>	
TUBERCULOSIS	WASSERMAN	
<i>(Throughout all the services there are distributed a large number of smaller research laboratories, many of which are supported by the Medical School. In the Harriet Lane Home, for instance, there are fourteen such laboratories)</i>		

## SPECIAL DEPARTMENTS

EXECUTIVE DEPARTMENT—Handles the administrative affairs of the Hospital and trains hospital executives.
SOCIAL SERVICE DEPARTMENT—Handles approximately 12,000 cases a year.
NURSING DEPARTMENT AND SCHOOL FOR NURSES—Includes 250 student nurses and 72 graduates as head nurses and instructors. Has trained 1,260 nurses.
POSTGRADUATE COURSES FOR PHYSICIANS      COURSE FOR DIETICIANS
MEDICAL LIBRARY      PHOTOGRAPHIC DEPARTMENT
WORKSHOP FOR APPLIANCES FOR CRIPPLED CHILDREN

## CHILDREN'S DISEASES

The first of these clinical institutes to be established was the Harriet Lane Home for Invalid Children, which was opened in 1912. It was erected with funds provided through the will of Mrs. Harriet Lane Johnston of Washington, D. C. This institute is devoted to the study and treatment of children's diseases. Last year it cared for 1,334 bed patients and approximately 18,000 additional children received treatment in its dispensary. The work of its staff, the members of the Hospital's Department of Pediatrics, have led to the discovery in its wards and laboratories of a large portion of that knowledge which made possible the introduction of successful methods for the treatment of rickets, tetany, acidosis and a large number of the diseases of children which are due to nutritional causes. The fact that children with bowlegs and heads deformed by rickets are rapidly ceasing to be a common sight is due to a great extent to the work of this department of the Hospital.

## UROLOGICAL CLINIC

The Brady Urological Institute, in which thousands of persons suffering from diseases of the genito-urinary system have received treatment, was founded by James B. Brady. The methods developed in this institute have reduced the mortality in operations for hypertrophy of the prostate gland from some 20 per cent. to 2 per cent. In its laboratories there has been discovered a long series of compounds for the treatment of disease. Among these are mercurochrome, an antiseptic of wide value not only in the treatment of urinary diseases but also for the purpose of com-



COURT OF THE PHIPPS CLINIC

bating blood poisoning and similar disorders, and flumerin, the introduction of which marked a new advance in intravenous treatment of syphilis.

## PSYCHIATRIC CLINIC

A third clinical institute was established through the gifts of Mr. and Mrs. Henry Phipps. This is the Phipps Psychiatric Clinic for the study and treatment of mental diseases. Mental disease still presents some of the most trying problems which confront the physician. This clinic is one of the few places which is equipped with practically every known facility for the study of the causes which underlie insanity and mental illness. So little is known of these disorders that such an institution occupies a position of even international importance.

## WOMAN'S CLINIC

Little more than a year ago a fourth clinical institute, the Woman's Clinic, was established through the gift of Mrs. Lucy Wortham James. From the standpoint of

the number of patients treated it approaches the general hospital, for 3,522 women were cared for in its rooms and wards last year. It is also the first and only modern obstetrical clinic in America to be established as a full-time department of both a hospital and a medical school.

#### THE WILMER CLINIC

Within the coming year there is to be established as part of the Johns Hopkins Hospital and the Johns Hopkins Medical School a fifth clinical institute. This will be the Wilmer Clinic for the study and treatment of diseases of the eye and investigation of the causes of blindness. It will be under the direction of Dr. William Holland Wilmer of Washington, D. C. In all \$3,000,000 has been contributed for this project.

#### COORDINATE STRENGTH

There are few hospitals in existence which have the counterpart of any one of these five clinical institutes. No other American hospital combines their equivalent in a single group. The Wilmer Institute, for instance, will be unique in that no like project has been attempted hitherto in this country, which for the most part has had to depend on Europe for the bulk of advanced research regarding diseases of the eye and for the training of its leading ophthalmologists.

Disease does not attack one part of the body and leave the other parts functioning normally. Diseases of the eye are often closely related to diseases of the brain; diseases of the bones to diseases of the blood; diseases of the skin to diseases of the internal organs; remote infections may result in serious and even fatal diseases of the heart.

#### INTERRELATION OF DISEASE

Throughout the whole field of human ailments the problems are so interrelated that one disease or one group of diseases can seldom be understood and treated to the best advantage without a thorough knowledge of other diseases or disorders which are related to the specific trouble under observation. The men who specialize in one field find that their work is generally much more effective if they can obtain aid from men who are specializing in other fields. That is the reason why each service of the Johns Hopkins Hospital and each of its clinical institutes gains strength through its association with the other departments of the unified group. None could be so useful and effective if it stood alone.

Because of these facts the Johns Hopkins Hospital has extended its services in an effort to compass, as nearly as possible, the entire range of medical and surgical ailments which afflict those who come to it for aid.

### III. *RELATION TO THE MEDICAL SCHOOL*

If disease were an open book, if it were thoroughly understood, hospitals would be in no further need of additional infor-

mation concerning its problems. But, although the last fifty years have seen greater medical progress than all the pre-

ceding years of history, the physicians and surgeons of a hospital find that all they know now does not begin to provide them with the knowledge which they need.

#### A TEACHING HOSPITAL

Therefore it is a matter of prime importance to remember that the Johns Hopkins Hospital is a teaching hospital—a hospital where men try not only to apply what is already known, but also seek to discover better and more effective methods for the conquest of disease, where such methods are not only applied to the relief of patients within the hospital but also serve to teach the physicians and the surgeons of the future. It was the first hospital in this country which was founded primarily with the idea that it should become a part of a medical school and should make the advancement of medical knowledge one of its major endeavors rather than a subsidiary activity.

#### BENEFICIAL RESULTS

The resulting benefits are twofold: first, the patients of the hospital receive the full benefit of the latest medical knowledge and the discoveries which result from research in the Medical School; second, the Medical School has the opportunity to study disease as a living problem rather than as a dead language or something which is dealt with merely in books and lectures.

#### FACULTY AND STAFF ARE ONE

The value of such cooperation between a hospital and a medical school is evident. The problem, however, has been to make



THE HARRIET LANE HOME

it effective. That an effective method was found at Johns Hopkins has been evidenced by the fact that its system has been followed by many of the leading hospitals of the country, particularly those which are associated with Class A medical schools. The union between the two institutions was brought about by making the staff of the Hospital and the faculty of the Medical School one body.

#### "THE FOUR DOCTORS"

The late Sir William Osler was the Physician-in-Chief of the Hospital and the first Professor of Medicine in the Medical School. Dr. William S. Halsted was the first Surgeon-in-Chief of the Hospital and Professor of Surgery in the Medical School; Dr. Howard A. Kelly was the first Gynecologist-in-Chief and Professor of Gynecology, and Dr. William H. Welch, who organized the Hospital's Department of Pathology, was also the first Professor of Pathology in the Medical School.

## BEST FOR THE PATIENT

Ever since that time the junior members of the staff, as well as the chiefs of services, have also been members of the Medical Faculty. This insures to patients the best of medical attention, for these men bring to the treatment of disease the latest and most effective medical knowledge. As teachers, they must give the reasons for the things they do, and hence their knowledge must be of the soundest type. Under such a system fallacies are open to immediate detection.

## RESEARCH AND MEDICAL PROGRESS

Engaged as it is with the Medical School in an educational project, the Hospital is seeking to advance medical knowledge. Thus the members of its staff are always endeavoring to discover better methods by which to combat disease. Although the Hospital has many laboratories of its own, which are in constant use for the chemical, physical and bacteriological tests necessary to the every-day diagnosis, the members of its staff are able to go much further in the study of the underlying causes of disease because of the laboratory facilities provided by the Medical School.

## COOPERATIVE EFFORT

The staff of the Johns Hopkins Hospital, for instance, has played a leading role in discovering the underlying cause of rickets and dependable measures for the prevention and cure of this disease. This could hardly have been accomplished without the laboratories of the Johns Hopkins Medical School and the Johns Hopkins School of Hygiene and Public Health, or

without the aid of men on the faculties of these schools.

## RELATION TO THE SCHOOL OF HYGIENE

Hospital patients are always the victims of disease, but the ideal hospital should endeavor not only to cure them but to keep them well. It is therefore of particular advantage that the Johns Hopkins Hospital is closely associated with the School of Hygiene and Public Health. This school is concerned primarily with the discovery of methods for the prevention of disease. It is regarded as one of the leading centers for this new medical science, and its students, mostly trained medical men, come to it from every continent. This school has been housed at a considerable distance from the Hospital, but its new building is being erected as part of the main medical group.

## AIDED BY THE UNIVERSITY

The problems of combating disease, to a great extent, concern the application to the functions of the living body of the basic knowledge of such sciences as Chemistry, Physics, Biology and Psychology. The departments of the Johns Hopkins University naturally are able to make a more extensive study of these sciences than are the Medical School and the School of Hygiene. Hence, the scientific faculties of the University are able to provide the staff of the Hospital with special aid and counsel which is often of the utmost importance. For example, the test which is now used in the Hospital to determine whether or not a patient's kidneys are in condition to withstand the

shock of an operation—a test which has saved many lives—is made with a substance discovered in the University's Department of Chemistry.

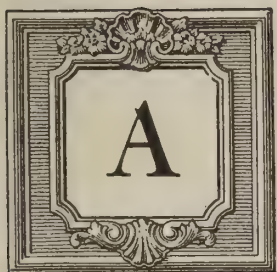
#### THE SUM

The general medical and surgical services of the Johns Hopkins Hospital, plus its five clinical institutes, plus the Johns Hopkins Medical School, plus the Johns Hopkins School of Hygiene and Public Health, plus the scientific departments of the Johns Hopkins University, sum up the scope of a medical group which offers in-

deed a mighty bulwark against disease. It also represents a foundation established by thirty-six years of outstanding fruitful endeavor and a physical plant which today would cost many millions of dollars to duplicate.

On the basis of what already exists at Johns Hopkins this country now has the opportunity to develop for itself, within a relatively short time, a medical center such as may well equal if not surpass anything which existed in Europe even prior to the war or is likely to exist there for many years to come.

## THE JOHNS HOPKINS HOSPITAL WHAT IT DOES



ALTHOUGH patients come to the Johns Hopkins Hospital from all parts of the country, its influence in promoting the conquest of disease goes far beyond the range of the persons who receive direct benefit from treatment within the institution itself.

The Hospital, as a center of medical education, is able not only to give its own patients much better care than would otherwise be possible, but is also able to benefit thousands of persons who will never see the Hospital itself.

### 1. *ADVANCING MEDICAL KNOWLEDGE*

There are now 1,936 Doctors of Medicine, graduates of the Johns Hopkins Medical School, who were trained in the Johns Hopkins Hospital. They are caring for the sick, preventing disease, and carrying on medical research in every state and territory of the United States and in fifteen foreign countries.

The graduates and former members of the Johns Hopkins medical staff, moreover, include 121 men who now hold full professorships in forty-two American and nine foreign medical schools. As the Johns Hopkins method of coordinating the work of medical education with that of hospital treatment has been adopted generally

throughout the country, the majority of these men are also members of the staffs of important hospitals where teaching is coordinated with care of the sick.

#### RESEARCH LEADERS AND CLINICIANS

On the staff of the Rockefeller Institute for Medical Research Johns Hopkins men outnumber those from any other medical institution. The directors of both the institute and its hospital are former members of the staff of the Johns Hopkins Hospital. Johns Hopkins men also occupy such positions as Surgeon-in-Chief, Physician-in-Chief, Obstetrician-in-Chief and Physician-in-Charge of the Neuropsychi-

atric Division, at the new Henry Ford Hospital in Detroit.

#### TRAINING HOSPITAL EXECUTIVES

Many of the directors of well-known hospitals also received their early training at Johns Hopkins. These include the directors of the hospitals of the Universities of Chicago, Maryland and Georgia; the Cornell Clinic, New York City; the Barnes Hospital, St. Louis; the Charles T. Miller Hospital, St. Paul, and the Hartford Hospital, Hartford, Conn. One of Great Britain's foremost institutions for the treatment of mental diseases, the Royal Mental Hospital of Glasgow, is also under the direction of a former member of the Johns Hopkins staff.

#### POSTGRADUATE INSTRUCTION

During several months of the year the Hospital also offers postgraduate instruction to practising physicians and surgeons, who come to attend clinics or serve for a period on the staff of some department. In recent years medical progress has been so rapid that many men in general practice are eager to avail themselves of such opportunities. Their patients, though they may never receive care at the Johns Hopkins Hospital, benefit through this work.

#### TRAINING OF DIETICIANS

Food is an important factor in the treatment of disease in the cases of undernourishment among children and in many other conditions where diet is all important. In view of this fact, a department was established in the Hospital to make a special study of nutritional problems in-



A CUBICLE IN THE WOMAN'S CLINIC

involved in the care of various patients, and at the present time a six-months' course in hospital dietetics is provided. An average of ten graduate dieticians, chiefly from other hospitals or universities are studying this work at Johns Hopkins throughout the year.

#### TRAINING OF NURSES

The School for Nurses is the principal educational branch of the Hospital as distinct from the University. This school was founded with the opening of the Hospital in 1889 and in its own field of medical education has been a leader in establishing higher standards.

It was the first:

- 1 To put instruction ahead of routine work in the training of nurses.
- 2 To abolish pay for nurses in training, thus putting them on a student rather than an employe basis.
- 3 To establish an eight-hour day, thus providing student nurses more ample time for study.
- 4 To establish laboratory courses for nurses.
- 5 To establish a three-year nursing course.
- 6 To employ regular paid instructors to conduct the courses for nurses.

Its alumni number 1,260 and among them are a large number of women who hold or have held the most important positions in the field of nursing throughout the world. They include:

Director of the Department of Nursing and Health, Teachers College, Columbia University.

Professor of Nursing, University of Michigan.

Director, Department of Nursing, American Red Cross.

Chief, Department of Nursing, League of Red Cross Societies, Switzerland.

President, American Nurses Association.

President, National League of Nursing Education.

Superintendent of Nurses, Union Medical College and Hospital, Peking, China.

The School for Nurses and the Department of Nursing of the Hospital are unified under the same control. The School,

therefore, not only trains nurses for service in other hospitals, in homes, in public health work and in industrial services, but also insures that the Hospital itself is provided with a corps of nurses who are competent to care for its patients.

#### WIDE INFLUENCE OF HOSPITAL TRAINING

Thus, through the men whose medical education was received in the Johns Hopkins Medical School and the Hospital, through the men who have received training in the Hospital as members of the staff or as postgraduates, and through the work of nurses and dieticians trained in the Hospital, the benefits derived from this institution are carried throughout the country and to distant parts of the world.

## II. THE STAFF

No matter how extensive the buildings, how complete the organization and the departmental services of a hospital, these things in themselves cannot establish an institution of the first rank. After all they are details—means to an end. The end is accomplished through them, but the accomplishment itself lies in the work of men—the men and women who make up the staff and personnel of the Hospital.

At the present time the personnel of the Johns Hopkins Hospital, including the Dispensary, is as follows:

Resident Physicians.....	75
Visiting Physicians.....	189
Officers and Head Nurses.....	72
Student Nurses.....	250
Lay Employes.....	752
	<hr/>
	1338

In keeping with the original direction of the founder, the staff of the Johns Hopkins has been always fortunate in having "surgeons and physicians of the highest character and greatest skill."

#### MORALE

Its reputation has not been established alone by the outstanding men who head the various departments. These men have been assisted by a large body of younger men of marked ability, and the efforts of the entire staff have always been marked by a spirit, a morale, which has fused the accomplishments of individuals into the greater and common record of the Hospital.

The members of the Johns Hopkins staff are willing to put pride in the accomplishments of the Hospital as a whole

before pride in individual accomplishment. The result is found in the widespread faith of the public in the Hospital as a whole; in the fact that hundreds of patients come to Johns Hopkins every year,

firm in the belief that they will receive the best of treatment, and yet without the remotest idea as to the identity of the individual physicians and surgeons who will attend them.

### III. THE PATIENTS

There is no arbitrary standard by which the ability of a hospital staff can be judged but one of the best tests is whether its patients come not only from the immediate community but also from distant points.

#### WHERE THEY COME FROM

From January 1st to December 31st, inclusive, 1924, there were 3,310 bed patients who came to the Johns Hopkins Hospital from homes outside of Baltimore. This was 33 per cent. of the total number for the year. Their residential distribution was as follows:

Maryland (outside Baltimore).....	997
West Virginia.....	381
Pennsylvania.....	273
Virginia.....	246
North Carolina.....	240
New York.....	185
District of Columbia.....	128
South Carolina.....	101
Tennessee.....	99
Florida.....	94
Ohio.....	73
New Jersey.....	65
Texas.....	44
Georgia.....	43
Delaware.....	35
Kentucky.....	34
Alabama.....	32
Connecticut.....	23
Illinois.....	21
Oklahoma.....	21
Other States East of Mississippi...	64
Other States West of Mississippi...	67
Residents of Foreign Countries....	44

3310

These patients included residents of forty-three states, the District of Columbia, the Panama Canal Zone, and ten foreign countries.

#### REPRESENTATIVE OF ALL CONDITIONS

The diseases from which these persons suffered were as diverse as their geographic distribution and the patients themselves ran the gamut of race, color, creed and condition. As an illustration, among those cared for at Johns Hopkins during the last few months were:

A former member of the Cabinet whose home was in California.

A negro who came to the Hospital by "riding the rods" of a freight train from North Carolina.

Wealthy residents of New York, Detroit, Chicago, Denver and San Francisco.

The blind children of a West Virginia mountaineer, whose entire savings for two years were barely sufficient to pay their fare to Baltimore.

#### THE WIDEST DISTRIBUTION

Although the majority of the patients at the Johns Hopkins Hospital are unable to pay the full cost of their treatment and care, it is among those who can do so and find the cost of travel no impediment, that the widest geographic distribution is found. A survey, representative of an average day in the Hospital, showed that 81.5 per cent. of the private patients came

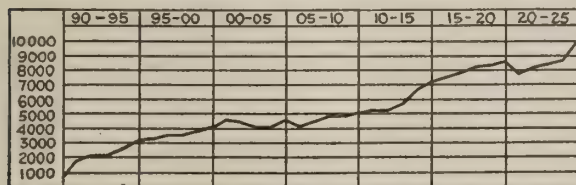
from homes outside Baltimore. Their residential distribution was as follows:

Baltimore.....	30
Pennsylvania.....	17
New York.....	15
Maryland (outside Baltimore)....	12
Florida.....	11
North Carolina.....	10
West Virginia.....	9
Virginia.....	7
Tennessee.....	6
Ohio.....	5
District of Columbia.....	4
Illinois.....	4
Alabama.....	3
Georgia.....	3
South Carolina.....	3
Texas.....	3
Canada.....	2
Connecticut.....	2
Delaware.....	2
Indiana.....	2
Michigan.....	2
New Jersey.....	2
Oklahoma.....	2
Colorado.....	1
Louisiana.....	1
Massachusetts.....	1
Mississippi.....	1
Mexico.....	1
Wisconsin.....	1
Total.....	162

#### 1924 A RECORD YEAR

In 1923 the Hospital cared for 8,549 patients. This total was greater than that for any previous year in its history. But in 1924, that is, the year ending January 31, 1925, it exceeded this record by 1,622. The total number of bed patients cared

YEARLY INCREASE IN NUMBER OF PATIENTS 1890-1925



#### DISTRIBUTION OF PATIENTS

*Year Ending January 31, 1925*

	<i>Patients</i>	<i>Days Treatment</i>
<b>GENERAL HOSPITAL</b>		
Private.....	1,370	26,917
Ward Rate.....	875	14,528
Less than Ward Rate....	719	11,492
Free Patients.....	1,330	24,563
	4,294	77,500
<b>HARRIET LANE HOME</b>		
Private.....	148	1,370
Ward Rate.....	94	1,602
Less than Ward Rate....	306	6,638
Free Patients.....	786	19,808
	1,334	29,418
<b>PHIPPS PSYCHIATRIC CLINIC</b>		
Private.....	132	9,248
Ward Rate.....	134	8,336
Less than Ward Rate....	74	5,099
Free Patients.....	84	3,831
	424	26,514
<b>BRADY UROLOGICAL INSTITUTE</b>		
Private.....	386	11,969
Ward Rate.....	131	2,652
Less than Ward Rate....	26	670
Free Patients.....	54	1,497
	597	16,788
<b>WOMAN'S CLINIC</b>		
Private.....	84	1,084
Semi-Private.....	51	621
Ward Rate.....	480	9,012
Less than Ward Rate....	929	12,956
Free Patients.....	1,978	23,933
	3,522	47,606
<b>Totals</b>	<b>10,171</b>	<b>197,826</b>

for during the year that has just come to a close was 10,171.

The daily average of bed patients for the year was 542. The average weekday total of Dispensary patients was 579. This means that on every regular weekday throughout 1924 the Johns Hopkins Hospital treated an average of 1,127 sick persons. More patients are constantly seeking aid than can be cared for, but the

Hospital is constantly striving to give treatment to all who come to it. On February 24th, 1925, a new record was estab-

lished when a total of 1,558 bed and dispensary patients received treatment on that day alone.

#### IV. FREE CARE

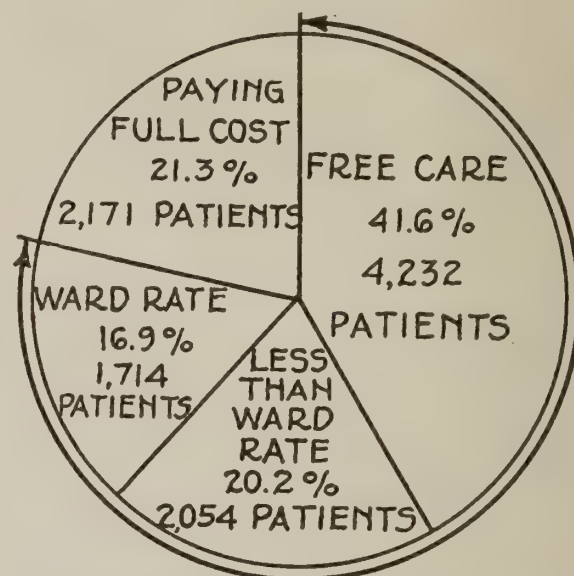
There has somehow arisen a widespread impression that a very large proportion of the patients who come to the Johns Hopkins Hospital are persons of wealth. This is not true. The facts are that for every bed patient who comes to Johns Hopkins and is able to pay the full cost of his treatment, four are cared for who are unable to do so; that for every patient who pays the full cost there are two patients who are unable to pay anything.

The following is the total of bed patients cared for in the Johns Hopkins Hospital from February 1, 1924, to January 31, 1925:

	Number Patients	Total Days Treatment
Private Patients. . . . .	2,120	50,588
Semi-Private Patients. . .	51	621
Ward Rate Patients. . . .	1,714	36,130
Less than Ward Rate. . . .	2,054	36,855
Free Patients. . . . .	4,232	73,632
Totals. . . . .	10,171	197,826

#### FORTY-SIX PER CENT. PAY NOTHING

Of these patients only 21.3 per cent. paid the full cost of their treatment. In all 78.7 per cent. were cared for at less than cost and 41.6 per cent. of the total were cared for absolutely without charge. The fact that 5 per cent. more who intend to pay prove to be unable to do so, brings the total of wholly free patients to 46.6 per cent. of the total.



#### 78.7% AT LESS THAN COST

Although 78.7 per cent. of the patients at Johns Hopkins are cared for at less than cost, they are not, in general, habitually dependent. They are rather to be regarded in the light of persons who are the victims of catastrophe such as a fire, an earthquake, or a war.

#### WHEN DISEASE STRIKES

Many an industrious workman, who is well able to provide for himself and his family under ordinary conditions, is unable to bear any of the cost of hospital treatment when he becomes acutely ill. Even though he has been thrifty and has accumulated savings, these are often only

enough to guard his family against privation while he is unable to work.

#### COST EXCEEDS \$500,000 A YEAR

At any rate such a patient is admitted to the wards regardless of his ability to pay. The ward rate is \$2.50 a day, approximately half the cost per capita to the Hospital for each patient, which is \$5.08. Only approximately one-fourth of the ward patients, who constitute four-fifths of all the bed patients in the Hospital, are able to pay the full ward rate. Less than one-fourth are able to pay some amount less than the ward rate. More than one-half of the ward patients pay nothing at all. In all the Hospital spent more than half a million dollars on free care last year.

#### ALL PATIENTS TREATED ALIKE

These patients who pay nothing or less than cost nevertheless receive the same expert treatment and care that wealthy persons seek to obtain by paying the regular private rate of seven to thirteen dollars a day, plus fees for treatment, and often the cost and time involved in com-

ing to Johns Hopkins from a great distance.

In the main it may be said that the ward patients receive exactly the same treatment as the private patients with the exception of not having a private room to themselves. Many members of the staff attend both private and the free patients; the same laboratories and facilities for diagnosis and treatment are available for both. All patients are admitted to the Hospital on the basis of but one consideration: the degree of their need for medical and surgical attention. Ability to pay is not a determining factor either in receiving or caring for patients in the wards.

#### CARE OF COLORED PATIENTS

In this connection it is important to note that 2063 of the Hospital's bed patients last year, approximately one-fifth of the total, were colored people. In many districts throughout the South there are no local facilities whereby colored people can obtain the best of medical and surgical attention, and from there many indigent patients turn to Johns Hopkins for aid.

### v. *THE DISPENSARY*

The patients who are so acutely ill that they must be cared for in the wards of a hospital are but a small proportion of those who need medical aid. Each day, for every patient who receives bed care in the Johns Hopkins Hospital, there is another who is treated in the Hospital's Dispensary. In all, approximately 3,127,711 visits have been made to this department. In the year ending January 31,

1925, alone, the number of dispensary visits was 176,631.

#### FREE CARE

Many of these patients would have become bed patients had it not been for the treatment received while they were able to be up and about. The suffering and the economic waste prevented by this service cannot be estimated. Most of those who



THE NEW DISPENSARY  
(To be opened in 1926)

avail themselves of it would suffer intensely if sickness destroyed their earning capacity even for a short while. This is shown by the fact that the average return in fees to the Hospital for each visit of a Dispensary patient is but nine cents. The cost of operating the Dispensary is a large item in the total of the \$500,000 a year which the Hospital expends on free care.

#### SCOPE OF THE WORK

To a large extent the same staff which attends the private patients cares for the Dispensary patients. Every facility at the command of the Hospital for diagnosis and treatment is used for their benefit. The wide scope of this service is illustrated by the following table of medical and surgical classifications of the Dispensary patients treated during one year.

#### DISTRIBUTION OF DISPENSARY PATIENTS YEAR 1924

Medicine.....	10,982
Gaströ-Intestinal.....	9,932
Metabolism.....	2,196
Tuberculosis.....	4,301
Neurology.....	3,692
Surgery.....	26,302
Genito-Urinary.....	11,915
Orthopedic.....	13,531
Ear, Nose and Throat.....	11,095
Diseases of the Eye.....	7,980
Skin.....	4,847
Gynecology.....	9,323
Obstetrics.....	7,535
Dentistry.....	2,030
Syphilis.....	19,031
X-Ray.....	11,185
Children's Diseases.....	18,232
Psychiatry.....	2,522
Total.....	176,631

Such brief classifications, however, do not always speak so eloquently as the fact that more than half of the crippled children of Baltimore alone have, at one time or another, received aid from the orthopedic service of the Dispensary. Most Dispensary patients have very little money but many of them contrive to come to the Dispensary from a distance. One family spent the accumulated savings of two years in paying the carfare of two children whose sight was restored through free treatment.

#### THE CARNEGIE GIFT

Remarkable as the record of the Dispensary has been, its work nevertheless has been hampered and curtailed by lack of money and space, both in the treatment of patients and in the teaching of students. The Carnegie Corporation, however, considering that the curtailment of this work would be a great misfortune, has given \$1,000,000 for the erection of a new dispensary building and \$1,000,000 for the endowment of the work.

#### VI. SOCIAL SERVICE

Attention has been called to the fact that the Johns Hopkins Hospital attempts not only to enable people to regain their health but also endeavors to teach and aid them to retain it when once regained. To this end it established its Social Service Department, one of the first hospital agencies of this kind. The workers in this department not only assist the medical staff in furnishing patients with such instruction as is needed best to insure continued health, but also strive to combat those influences which, though not primarily medical and surgical problems, have a most important bearing on the recovery and subsequent health of the patient.

##### THE PROBLEM

Before this work was begun patients not infrequently came to the Hospital for treatment, were discharged as cured and then returned within a short time suffering with the same ailment. Sometimes this would occur repeatedly within a few months. The results were disappointing—

waste in the health of patients, waste of the time of the physicians, and in the cost of treatment.

##### THE SOLUTION

By giving special attention to aiding patients in establishing habits of life which are conducive to health, obtaining employment such as is not detrimental to them as individuals, and in improving the hygienic surroundings of daily life, the Social Service Department has done much to overcome the cases of recurring ailments. A large part of its work, however, has to do with the patient while he or she is still in the Hospital. Recovery often can be materially hastened by the removal of worries which interfere with a patient's normal recuperation.

Sometimes a mother is worrying because she fears her children are being neglected in her absence, or a father does not get well because he is afraid he will lose his job while he is in the Hospital. When such fears are put to rest, the effect on the re-

covery of the patient is often remarkable.

This department also endeavors, whenever possible, to bring all members of a family to the Hospital for examination, when one of their number is found to be

suffering from a communicable disease. In this manner the contact of a single person with the Hospital often results in an entire home being freed from disease.

## VII. IDEALS

Money, building, equipment, able administrators and able staff are not alone sufficient to make a hospital all that it should be. A hospital is a human institution, not a machine. For that reason it must have certain aims and ideals by which to guide its course. The first object of the Johns Hopkins Hospital is, as far as possible, to give the patient the most effective treatment and care. Its activities as a center of medical education exist primarily in the interest of the patient. Thus, the attitude of the Hospital toward the patient is the criterion of its policy. This attitude is summarized in the following code:

### THE CODE

- ☞ *All patients are admitted without regard to creed, color, race, social condition, or ability to pay.*
- ☞ *All patients are admitted solely on the basis of their need for medical and surgical attention.*

- ☞ *All patients are to receive equal consideration and care.*
- ☞ *All patients are to receive the full benefit of scientific investigation seeking better methods to combat disease.*
- ☞ *All patients are to be regarded as individual problems rather than general "cases."*
- ☞ *All patients are to receive not only skillful medical and surgical attention, but considerate treatment as human beings as well.*
- ☞ *All patients are to receive any aid the Hospital can give, in addition to hospital care, which will promote their recovery.*
- ☞ *All patients are to be given any instruction or information which will help them to stay well after they have left the Hospital.*
- ☞ *All patients are to be treated fairly in regard to fees, no matter whether they are able to pay much, little or nothing at all.*

## VIII. THE FRUITS OF RESEARCH

In surveying the scope of the work that goes on within the Johns Hopkins Hospital there is danger of thinking of its usefulness only to the persons primarily involved, the patients in the beds and the patients who come to the Dispensary for treatment. It must always be remembered

however, that the research and skill brought to bear in the constant effort to provide better means and methods for the treatment of these immediate patients have resulted in great advances which have been of benefit to patients in all parts of this country and in foreign lands as well.

To recount even a general summary of representative Johns Hopkins contributions to the advance of medical knowledge requires a pamphlet by itself, such as was recently published by the Half-Century Committee under the title: "The Spirit of Inquiry in Medical Education." It would not be fitting, however, to pass by this subject without some word concerning the part which present and former members of the staff of the Johns Hopkins Hospital have played in the establishment of modern methods in Medicine and Surgery.

#### IN SURGERY

In Surgery the substitution of skillful dissection for blunt tearing; the practice of the gentle handling of tissue to avoid trauma and of leaving no dead tissue behind; the present operative methods in cases of intestinal diseases, hernia, cancer of the breast, goitre, gall-bladder surgery, blood vessel surgery, brain surgery and gynecological surgery, all are standards and methods which, as now followed in this country, owe much to the past and present members of the Johns Hopkins staff.

#### IN MEDICINE

In Medicine the same is true. The fact that the underlying causes of disease can be discovered and finally overcome by exhaustive research involving a deep

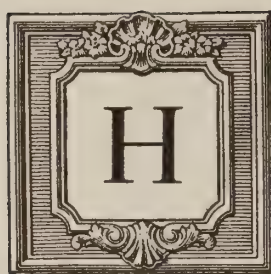
knowledge of the chemical and physical reactions of the body and of the activities of bacteria, has been demonstrated repeatedly by the work at Johns Hopkins. Here it was shown that the laboratory provided a most practical means for applying the knowledge of the exact sciences to the specific problems of the individual in the hospital bed.

The diagnosis of typhoid fever by blood culture, the isolation of the paratyphoid bacillus, the first important studies in this country of amoebic dysentery, the discovery of the cause of tetany, the discovery of the Welch Bacillus, the gas-producing organism which was a common cause of "gas gangrene" in the wounds of soldiers, are typical products of the work in the departments of Medicine and Pathology in the Johns Hopkins Hospital.

#### HOSPITAL PUBLICATIONS

Every laboratory research and every observation of disease at Johns Hopkins Hospital, wherein something is discovered which will be of benefit to others in protecting against or combating disease, is published. The Hospital and University maintain two periodicals for this purpose. They are the *Bulletin of the Johns Hopkins Hospital* and the *Johns Hopkins Hospital Reports*. The scientific medical papers printed in this manner give to the entire world the benefits of discoveries made in the Johns Hopkins Hospital.

## THE JOHNS HOPKINS HOSPITAL ITS FUTURE



UMAN institutions, no matter how distinctive their past record, do not maintain the same level of achievement. They either retrogress or go forward. It is the intention of the Johns Hopkins Hospital to go forward. When an army moves forward it consolidates the gains already made, as well as marking out new objectives. These two characteristics pervade the plans which the Hospital is laying for the future.

In the early part of this presentation it was pointed out that one of the chief distinctions of the Johns Hopkins Hospital was the fact that it now has, in addition to the general medical and surgical services, five great clinical institutes, each one of which is a special hospital and

research center in itself. These, with the general medical and surgical services of the Hospital represent the units established in an encircling movement now under way at Johns Hopkins to completely invest and lay siege to the entire province of disease.

### 1. *DISEASES OF CHILDREN*

At the present time one of these units is threatened financially. This is the Harriet Lane Home for Children, the institute which is devoted to the study and treatment of the acute diseases of infancy and childhood. One-third of the income now used to support its work is derived, under temporary permission, from \$1,000,000 of a fund contributed by the General Edu-

cation Board for the general development program of both the Medical School and the Hospital. This money must soon be expended according to the terms of the gift.

#### A TRAGIC CRISIS

Unless the Hospital obtains \$1,000,000 to replace this sum, it will be faced by the tragic alternative of closing one-third of

the beds now devoted to the medical care of children or of abandoning free care in this department. The adequate financing

of this work is the most immediate need of the Hospital program.

## II. *MEDICINE AND SURGERY*

The next step in rounding out the group of clinics is the enlargement of the facilities for general medicine and surgery. Present facilities are entirely inadequate, but opportunity for equal progress in all other branches of Medicine and Surgery can be provided for at Johns Hopkins by the reconstruction, enlargement and endowment of its present medical and surgical clinics. The Medical School, for instance, is seeking \$500,000 each for development in the following fields: orthopedic surgery, diseases of the ear, nose and throat, and diseases of the skin. At present the Hospital has very few beds for the treatment of diseases in these fields, but the reconstruction of the medical and the surgical wards would overcome this deficiency.

### THE TRUNK OF THE TREE

The special clinics and institutes of the Hospital contribute greatly to its general strength and effectiveness but the very foundation of the Hospital's work is its general medical and surgical wards. Of the 683 beds of the Johns Hopkins Hospital only approximately one-fourth are devoted to general Medicine and Surgery. The Hospital is now like a tree which has branched out fruitfully without a corresponding growth of the trunk. This is due to the fact that it has not received money for the reconstruction and enlargement of its general wards.

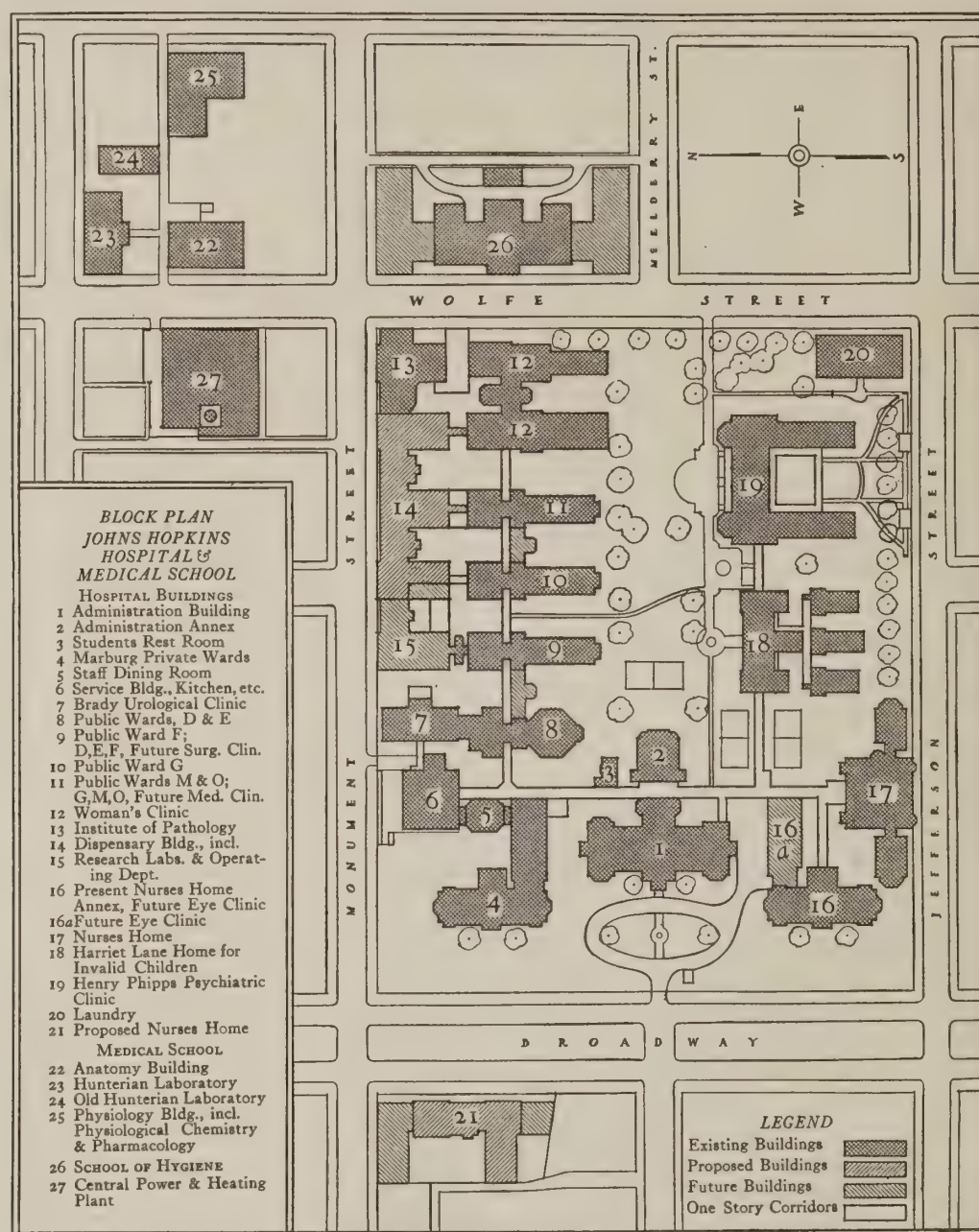
There are ninety-two beds in the medical clinic and ninety-three beds in the surgical clinic. Both are confined to cramped quarters in the identical structures which they occupied when the Hospital was opened in 1889. The lack of better opportunities to study general Medicine and Surgery is also hampering the progress of the Medical School.

### THE SUPREME REASON

But the one supreme and compelling reason which calls for the reconstruction and expansion of the medical and surgical clinics is the fact that hundreds of patients in excess of the number that can be accommodated, particularly from the East and South, are applying to the Hospital each year for treatment.

There are, for instance, only ten beds for the surgical care of children and only ten beds for contagious diseases of adults. The arrangement of the old wards is not such as to provide for the most effective and economical grouping of patients according to their diseases and, with the progress of medical science, this will become an increasing handicap unless remedied.

As they stand now, the old wards can be reconstructed so that each new clinic can accommodate from 150 to 200 patients. The cost in each instance will not be more than \$650,000, which is considerably less than would be required for erect-



ing wholly new buildings. The accompanying drawing illustrates how two old wards, similar to those which now house the Medical Clinic, were reconstructed in the building of the Woman's Clinic, which adjoins them.

#### ENDOWMENT OF FREE BEDS

These clinics are devoted chiefly to the care of free patients or patients who pay but a fraction of the cost of their care and treatment. Their enlargement will call for additional endowment for the free care of



additional patients therein. Each of these clinics must have \$1,500,000 in endowment for their operation when reconstructed. The Hospital hopes, however, to build up a considerable portion of these

funds by the endowment of memorial beds. The cost of endowing such a bed so that it may be devoted to free care in perpetuity is \$20,000.

### III. NERVOUS DISEASES

Finally, in order to completely round out the group of clinical institutes at Johns Hopkins, a Neurological Clinic should be established. At the present time America has no great institutes for the research, study and treatment in the field of nervous diseases such as exist in Europe and particularly in England. As the Johns Hopkins Hospital already has the Phipps Psychiatric Clinic for mental diseases, it is most logical that there should be established here a neurological clinic. The nervous and the mental diseases are so closely related that the existing and the proposed clinic would each supplement in a most effective manner the work of the other.

#### TO MEET A NATIONAL NEED

The proposed Neurological Clinic would be devoted to the study and treatment of such diseases as neuritis, hydrocephalus (water on the brain), traumatism (injury to the nervous system), tumors of the brain, paralysis, and like afflictions. Its establishment would be an advantage not only to the patients who come to Johns Hopkins from all parts of the country but would also be a contribution to hospitals and medical schools in all parts of this country through providing facilities such as now do not exist in America for the training of the neurologists of hospital staffs and of medical school faculties.

*IV. CONVALESCENT BRANCH*

There is one way in which the service as a whole can be increased materially without the addition of a single bed to the Hospital proper. This can be accomplished by the establishment of a convalescent branch in the country for patients who are on the road to recovery but yet not well enough to return to their homes. This would shorten the average stay of patients in the Hospital proper

and enable it to care for a larger number of critical cases. The recovery of patients can also be hastened materially if they are removed from the city and from strictly hospital surroundings as soon as they become convalescent. It will cost \$200,000 to build and \$600,000 to endow an adequate convalescent branch of the Johns Hopkins Hospital such as would be adequate to meet its needs.

*V. NURSES HOME*

In the private pavilion, in the wards, in operating rooms, and clinics, physicians and surgeons come and go. They spend only an hour or two with a patient at any one time and frequently but a few minutes. Yet every minute of the night and day each patient is under the constant care of a nurse. A nurse is at the bedside or within sight and call all the time. On whether she does or does not carry out her mission faithfully hang the lives of patients and the reputations of hospitals. The morale of the nursing corps therefore is of the utmost importance.

It has been demonstrated that this

morale flourishes best when student nurses, resident nurses and head nurses not only work together but also live together as one family group. At the present time many of the student nurses are quartered in old buildings outside the Hospital, the nurses' quarters in the Hospital are not unified, and a part of them must soon be taken over for other purposes. For this reason the Johns Hopkins Hospital is about to let the contract for a new Nurses Home which will cost upward of \$650,000 or \$700,000. This is one of the most pressing needs of the present program and will have to be met immediately.

*VI. SCHOOL FOR NURSES*

The Hospital also is seeking \$500,000 for the endowment of the School for Nurses. As an educational institution this school is at present dependent on the general funds of the Hospital and has no fixed income of its own on which it can rely for support. The best of our schools, colleges, and universities are endowed institutions or receive their income directly from the

State and not as an indefinite part of some other appropriation. The foremost authorities on nursing education are of the opinion that this profession, in which women have proved their superior fitness almost to the total exclusion of men, will never be adequately provided for from the standpoint of education until its schools have independent endowment.



THE FUTURE HOME FOR NURSES  
(To be opened in 1926)

To safeguard the system of education of nurses is most important to the public, to physicians, and to the whole public health program.

#### VII. MEDICAL LIBRARY

The needs of the Hospital are so closely related to those of the Medical School and the School of Hygiene and Public Health, that some of them are fully as vital to the schools as to the Hospital. Medical books—for the most part the

same books—are needed by the staff of the Hospital and the faculty and students of the schools. From the standpoint of numbers and the material they contain, the books at Johns Hopkins constitute one of the best medical libraries in this country. But these books as a whole are not easily available to all the men and women who are connected with the schools and the Hospital. The Hospital has its library. Each of the schools has its own.

All these libraries are so limited in space that a large number of the books are scattered through various departments. The need for a central medical library building therefore is great. It will cost in the neighborhood of \$450,000 to build and \$800,000 will be needed for its maintenance and the yearly acquisition of such new medical writings as are necessary to the study and treatment of disease and the pursuit of research.

#### VIII. *HEATING AND POWER PLANT*

The Central Heating and Power Plant is also a joint enterprise which will serve the Medical School and the School of Hygiene as well as the Hospital. Together they form a medical center which requires the power and light of a small city. Thus the plant, which is now being erected,

will cost approximately \$700,000, which, together with about \$300,000 to be expended in replacing antiquated heating and lighting systems in the older buildings, will raise the entire cost of this project to the neighborhood of \$1,000,000 by the time it is complete.

#### IX. *SERVICE BUILDING*

Beside the power plant, the general program will necessitate the erection of a new service building at a cost of \$200,000, for the needs of provisioning the Hospital,

preparing food for the staff and patients and providing additional storage room. The present service building already has been outgrown.

#### X. *CARE FOR PERSONS OF MODERATE MEANS*

One of the most common criticisms leveled against American hospitals in general is that, although they provide the best medical and surgical attention at their command for the wealthy, who can pay for it, and provide free, or at a nominal charge, similarly good care for persons who have little or no money, they fail to provide equally well for persons of moderate means at a fee in keeping with their ability to pay.

The average clergyman, the average newspaper man, the average man or woman whose income return to the government does not include a surtax, is often in a grave dilemma when faced by the need of hospital care, particularly when the ailment is complex and acute. He hesitates to consult a number of specialists, as would a wealthy man. He also hesitates to go to the dispensary or wards of a hospital, knowing that the fees in

## THE TEN YEAR PROGRAM FOR THE HOSPITAL

	CONSTRUCTION	ENDOWMENT	TOTAL
*GENERAL ENDOWMENT . . . . .		\$2,000,000	\$2,000,000
*MEDICAL CLINIC . . . . .	\$650,000	1,500,000	2,150,000
SURGICAL CLINIC . . . . .	650,000	1,500,000	2,150,000
*CHILDREN'S DISEASES . . . . .		1,000,000	1,000,000
NERVOUS DISEASES . . . . .	750,000	1,000,000	1,750,000
*NURSES HOME AND SCHOOL . . . . .	650,000	500,000	1,150,000
CONVALESCENT BRANCH . . . . .	200,000	600,000	800,000
*MEDICAL LIBRARY . . . . .	450,000		450,000
*HEATING AND POWER PLANT . . . . .	1,000,000		1,000,000
SERVICE BUILDING . . . . .	200,000		200,000
DIAGNOSTIC CLINIC FOR PERSONS OF MODERATE MEANS . . . . .		500,000	500,000
	<hr/> \$4,550,000	<hr/> \$8,600,000	<hr/> \$13,150,000

NOTE: The items indicated with a star are those included in the immediate program which both the Hospital and the Medical School of the University hope to finance before February 22, 1926. In this immediate program, \$1,000,000 each in general endowment is being sought for both the Hospital and the Medical School. In addition, the Medical School is seeking \$800,000 for the

endowment of the Central Library. All the items of the immediate program total \$8,550,000. Toward this amount \$3,500,000 has been received from the General Education Board and \$85,000 from graduates of the School for Nurses. Thus the net total which is necessary to carry out the immediate program for medical needs at Johns Hopkins is \$4,965,000.

these services are set for the accommodation of those who have little or no money. In consequence, the person of moderate means often endeavors to shift as best he can without going to a hospital and, as a result, often suffers irretrievably.

## THE SOLUTION

To meet this situation the Johns Hopkins Hospital will establish, in its new and more ample Dispensary Building, a diagnostic clinic for persons of moderate means where such a patient may come

with his family physician and receive, for a moderate fee, all the benefits of diagnosis by specialists in the various medical sciences which have a bearing on his individual condition. Not infrequently, however, the patient will need care in a hospital bed, and will be able to pay more than the ward rate but less than the rate for private patients. The Hospital cannot admit many of them as private patients unless it has at its disposal a sufficient fund from which the difference between what the patient can pay and the cost of private care can be made up.

## THE COST

It is estimated that an endowment of \$500,000 will be adequate to provide sufficient income both for this purpose and

for making up the deficiency between the fees of such patients and the cost of operating a diagnostic clinic for persons of moderate means.

## XI. GENERAL ENDOWMENT

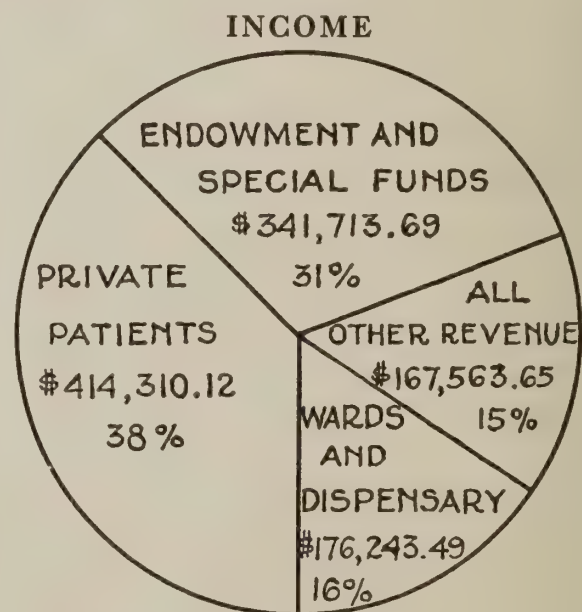
There yet remains one more thing to insure the success and stability of the Hospital's future program. This is the need for \$2,000,000 in general endowment. Half of this sum is needed within the next few months to provide for the proper operation of services which are now without adequate funds. To be of the greatest benefit this fund should be unrestricted, yet the same result could be gained by endowment for various services now being supported from the general income. These include:

Clinical Chemistry Laboratory.....	\$100,000
Clinical Bacteriological Laboratory	100,000
Clinical Serological Laboratory....	100,000
(Preparation of Serums and Vaccines)	
Physiological and Cardiographic Laboratories.....	\$200,000
(Diagnosis of physical action of the heart and other bodily organs)	
<i>(All the above laboratories are used mainly for the active work in diagnosing the disease and aiding in the treatment of patients.)</i>	
Social Service.....	\$500,000
Dietetic Department and School...	200,000
Appliances for Crippled Children...	50,000
Dental Care.....	50,000
Care of Sick Nurses.....	50,000
Hospital Publications.....	25,000
Endowed Beds and Rooms for Free Care.....	15,000 to 35,000

## XII. FINANCES

The last item of the program, general endowment, calls for an explanation of the present financial status of the Hospital. This institution receives no governmental support, Federal, State or Municipal. It is primarily an endowed institution. Its growth has been made possible by gifts from individuals and foundations which have sought in this manner to invest for the welfare of humanity. The bulk of these funds, however, has been given for special purposes rather than for the support of the Hospital as a whole.

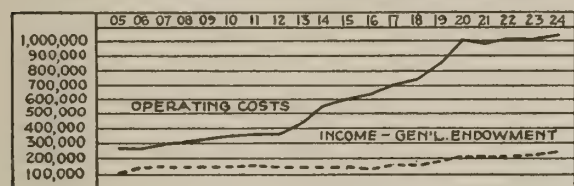
Despite the fact that it is now caring for a yearly total of approximately five times as many patients as the average during the first few years of its operation, and despite the fact that costs in general are more than twice that of thirty-six years ago,



the total productive endowment of the Hospital has not begun to keep pace with

these increases. The present total for the support of this 683-bed hospital is \$6,134,714.00. This is less than twice the size of the productive endowment which was at the disposal of the Hospital in 1889 for the operation of 230 beds.

INCOME FROM GENERAL ENDOWMENT HAS FAILED TO KEEP PACE WITH OPERATING COSTS—1905 THROUGH 1924



GENERAL ENDOWMENT

Even now \$1,974,088.53 of the productive endowment is restricted for special purposes. This means that the total general endowment, on which the Hospital must depend in the main for support, in addition to fees and other charges, is but \$4,160,623.82. This sum includes Johns Hopkins original gift of \$3,228,404.84 and means that \$932,218.98 is the sum of all additional general endowment that the Hospital has received since 1889.

#### DOES NOT PAY FREE CARE COST

The income from all endowment is \$341,713.69 a year. This amounts to approximately only 70 per cent. of the annual amount the Hospital is spending on free care.

The question naturally arises: How has the Johns Hopkins Hospital, in the face of rising costs and increasing numbers of patients and despite the fact that it limits the fees of even the 20 per cent. of its patients who can pay all or more than the cost of their treatment, how has it, in

spite of these facts, kept free from debt and continued to increase its usefulness?

#### EFFICIENT OPERATION

The Medical School bears a large portion of the salaries paid to the staff but the chief answer to the question lies in the fact that the Hospital, which has been a model of administration, has been able to maintain its high standard of treatment and care at an average daily cost per patient of \$5.08. The report of the General Hospital Fund has shown this to be much less than the average operating expense of metropolitan hospitals throughout the East.

#### MAXIMUM RETURN ON INVESTMENTS

Although the funds of the Hospital are conservatively invested it receives an average return of 5.46 per cent. This is conceded to be as much as can be hoped for in consideration of the factors of safety which must be maintained in the investments of such an institution. Both from investments and from administration the authorities of the Hospital are convinced that they are obtaining the maximum return from their money, but there is no margin to fortify the institution against any general financial depression and there is grave need of additional endowment to ballast the general development program which is now being undertaken.

#### PROGRESS OR RETROGRESSION?

The cost of operating the Hospital during 1924 resulted in a deficit of \$41,000. This means that unless additional general endowment is obtained the Hospital must stint its services for the present year and retrogress instead of going forward.

## MEMORIALS



As the Johns Hopkins Hospital serves the entire nation it is appealing to the nation as a whole for the support of its program, and particularly to the people of Baltimore, New York and the other large cities of the East and South from which a great number of its patients come. Its authorities are convinced that its major needs constitute a series of outstanding opportunities for those who wish to establish memorials that will be monuments of lasting benefit to mankind.

### MEMORIAL GIFTS

In addition to the major projects of the program there are a number of special funds, included in the totals, which well

may serve as the basis for establishing memorials. A number of these are classified in the following list under the amounts needed for each.

**\$100,000**

CLINICAL CHEMISTRY LABORATORY

CLINICAL BACTERIOLOGICAL LABORATORY

CLINICAL SEROLOGICAL LABORATORY

**\$50,000**

ENDOWMENT FOR THE PURCHASE OF APPLIANCES FOR CRIPPLED CHILDREN

ENDOWMENT FOR THE CARE OF SICK NURSES

MEMORIAL INSTRUCTORSHIP IN THE SCHOOL FOR NURSES

**\$35,000**

ENDOWED PRIVATE ROOMS

**\$30,000**

ENDOWED BEDS IN THE PHIPPS PSYCHIATRIC CLINIC

**\$25,000**

ENDOWMENT FOR THE HOSPITAL PUBLICATIONS

ENDOWED CUBICLES

**\$20,000**

ENDOWED BEDS IN GENERAL SERVICE

\$15,000

ENDOWED BEDS IN THE HARRIET LANE HOME

\$1,000

MEMORIAL ENDOWMENT FUNDS TO PAY FOR THE FREE CARE OF ONE  
PATIENT FOR TEN DAYS EACH YEAR AT THE RATE OF \$5.00 A DAY

It is likely that a considerable portion of the endowment needed for the support of free care in the enlarged medical and surgical wards, or in meeting the emergency situation in the care of children, will be made up of single memorial beds. The laboratories included in this list are now dependent for support on the restricted present endowment, yet on them depend in large part the diagnosis of disease in the Hospital and the preparation

of the antitoxins and serums which are among the most effective weapons for the conquest of many diseases.

In the last analysis, however, any gift, no matter how large or how small and no matter whether or not it is designated as a memorial, is in reality a memorial—a lasting memorial which will live on, generation after generation, in the lives of those who benefit by the work of the Johns Hopkins Hospital.

*(It has been possible, herein, to give but a limited outline of both the work and the needs of the Johns Hopkins Hospital. Further information concerning these subjects can be obtained from the office of the Johns Hopkins Half-Century Committee, 603 Keyser Building, Baltimore).*



# THE JOHNS HOPKINS HOSPITAL

## POINTS OF DISTINCTION AND INTERESTING FACTS

**F**IRST American hospital to integrate its work with the activities of a medical school in such a manner that patients might obtain the full benefit of the foremost advances in medical knowledge.

¶ First hospital to be associated with a school of Hygiene and Public Health which seeks knowledge to prevent disease before there is need for a cure.

¶ Includes in its medical group a number of clinical institutes, which are special hospitals in themselves. These include the Woman's Clinic, the Harriet Lane Home (Children's Diseases), the Phipps Clinic (Mental Diseases) and the Brady Urological Institute (Genito-Urinary Diseases), and will soon include the Wilmer Institute for diseases of the eye.

¶ Research seeking better and more effective methods to combat disease is carried on in every department.

¶ Educational activities include the training of medical students, hospital executives, research workers, nurses and dieticians and the postgraduate training of physicians.

¶ Patients and students come to it from all parts of the United States and from many foreign countries.

¶ Its publications give the benefit of medical discoveries to the world in general.

¶ Strives to teach patients how to stay well after they are cured.

¶ Social Service Department combats factors other than medical which impede the recovery of patients.

¶ Seventy-nine per cent. of its patients are treated at less than cost and more than half of these are free patients.

¶ Patients are admitted solely with regard to the seriousness of their illness and without regard to race, creed, color, social condition, or ability to pay.

¶ Approximately one-fourth of its patients are colored people.

¶ Half the crippled children of Baltimore alone have received treatment through the Orthopedic service.

¶ Bed patients cared for since 1889 total 190,347.

¶ Total days of treatment given patients since 1889, approximately 3,303,400.

¶ Total visits to the Dispensary in the same period, approximately 3,127,000.

¶ Although the yearly number of bed patients increased from 1,890 in 1890 to 10,171 in 1924, the Hospital's general endowment increased but one-third in that period.

¶ During the war it equipped and staffed throughout a 500-bed military hospital, the first to sail overseas with a contingent of American troops.

THE JOHNS HOPKINS  
HALF-CENTURY COMMITTEE

603 KEYSER BUILDING  
BALTIMORE

DANIEL WILLARD, General Chairman

SEWARD PROSSER, Treasurer

JOSEPH S. AMES

EDWIN G. BAETJER

NEWTON D. BAKER,

LEWELLYS F. BARKER, M.D.

THOMAS R. BROWN, M.D.

FRED G. BOYCE, JR.

DAVID J. CARVER

H. A. B. DUNNING

CHARLES K. EDMUNDS

RICHARD H. FOLLIS, M.D.

FRANK A. FURST

F. H. GETMAN

JOHN M. GLENN

FRANK J. GOODNOW

B. HOWELL GRISWOLD, JR.

HENRY D. HARLAN

WILLIAM H. HOWELL

R. BRENT KEYSER

ROBERT G. MERRICK

SIDNEY R. MILLER, M.D.

JOHN R. OLIVER, M.D.

ALEXANDER RANDALL

BLANCHARD RANDALL

ROBERT H. RILEY

JULIAN D. SEARS

WINFORD H. SMITH, M.D.

GEN. GEORGE O. SQUIER

HENRY L. STRAUS

W. STUART SYMINGTON, JR.

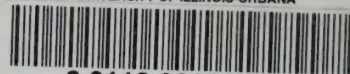
LEWIS H. WEED, M.D.

WILLIAM H. WELCH, M.D.

PRESS OF  
NORMAN T. A. MUNDER & CO.  
BALTIMORE



UNIVERSITY OF ILLINOIS-URBANA



3 0112 061925589

THE LIBRARY OF THE  
JAN 10 1980  
UNIVERSITY OF ILLINOIS